

YUMA FASTPITCH & TBALL LEAGUE SPORTS INC.

COVID-19 Clause and Refund Stipulation Statement 2022/2023

Dear YFTL Parent/Guardian,

This COVID-19 Clause and Refund Stipulation Statement was created in order to afford as much advanced transparency regarding league operations and requirements. Currently the YFTL “*plan*” is to run its season in a typical timeframe, minding all: USA SOFTBALL, Gubernatorial and CDC safety guidelines.

Should a time arise, after registration has closed, in which season needs to be delayed (longer than deemed reasonable by the YFTL Board of Directors), or must be cancelled due to COVID-19 related safety concerns, YFTL is advising that there are some fees that **ARE NOT REFUNDABLE** once your child(ren) are registered. These fees include:

- City of Yuma administration fee \$7.75, and
- YFTL registration \$7.50

TOTAL NON-REFUNDABLE FEES ***\$15.25***

Additional note: NO refunds, of any kind/form will be issued due to COVID-19 caused, or weather related cancellation once 75% of season has been played. Any COVID-19, quarantined games MAY not be re-scheduled, due to field availability. All attempts will be made, however are NOT guaranteed.

*****Refunds NOT due to the ABOVE COVID Clause and Refund stipulation will Not be given after 03/04/2022 Unless approved through YFTL Board of Directors.***

YFTL WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY

In participating in a YFTL sponsored/hosted activity, I agree:

Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,

1. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
2. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation.
3. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS YFTL, their officers, officials, coaching staff and other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ, UNDERSTAND AND AGREE TO THE "COVID-19 Clause and Refund Stipulation Statement" FOR THE 2022 SEASON AND I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant: _____

Participant signature: _____

Date signed: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____

Parent guardian/signature: _____

Date signed: _____

USA SOFTBALL ASSOCIATION, COVID-19 PROTOCOLS

The below provides the definitions and responsibilities for individuals, clubs, and teams as it relates to what is required if an individual has close contact exposure, symptoms, or a positive result. Regardless of which may be the situation notifying the coach and club must a top priority.

CLOSE CONTACT EXPOSURE TO POSITIVE CASE OF COVID-19

DEFINITION

Close contact would be defined as:

- You were within 6 feet of someone who has COVID-19 for at least 15 minutes.
- You were provided care at home to someone who is sick with COVID-19
- You had direct physical contact with the person (hugged or kissed them)
- You shared eating or drinking utensils
- They sneezed, coughed or somehow got respiratory droplets on you **ACTIONS OF INDIVIDUAL(S)**

Notify club/coach ASAP and quarantine for 14 days. Monitor for:

- Fever > 100.4
- Cough
- Shortness of breath
- Chills
- Headache
- Other symptoms

ACTION OF TEAM(S)

Team is permitted to continue training and participating in events. Team members and coaches should be mindful of onset of any symptoms.

COMMUNICATION REQUIRED

Club/team should communicate to the team(s) that have an individual on the team(s) has been exposed and will begin a 14 day quarantine.

RETURN TO PLAY

Completion of 14 days of quarantine

SYMPTOMS

DEFINITION

People with COVID-19 have had wide range of symptoms reported - ranging from mild symptoms to severe illness.

Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19: □

Fever or chills

- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

ACTIONS OF INDIVIDUAL(S)

Notify club/coach ASAP and get a COVID-19 test

Quarantine until at least 10 days have passed since symptom onset

AND

At least 24 hours have passed since resolution of fever without that use of fever-reducing medications

AND

other symptoms have improved ACTION

OF TEAM(S)

All team activities are suspended for 14 days OR all team activities are suspended until the individuals(s) test results are received. If test was negative team can resume all activities.

COMMUNICATION REQUIRED

Club/team should communicate to the entire team(s) that have an individual on the team(s) has demonstrated symptoms will begin a quarantine.

All team activities suspended immediately. Entire team will begin a full 14 day quarantine. (NOTE: Quarantine can end prior to 14 days *ONLY IF* the individual who displays symptoms provides a negative test result)

Club/team should communicate to any opposing teams that they played against within the date of the onset of symptoms that they had an individual with symptoms. Once test results are received there should also be a notification.

DO NOT give any names or personal details.

NOTE: Opposing team are not required to quarantine. Notification is done as a courtesy to be aware of the situation.

RETURN TO PLAY

All three actions (quarantine for 10 days after symptoms began, at least 24 hours without a fever without medicine, and other symptoms improved) have been met.

POSITIVE

DEFINITION

Official results provided by medical professional

ACTIONS OF INDIVIDUAL(S)

Notify club/coach ASAP and get a COVID-19 test

Quarantine until at least 10 days have passed since symptom onset

AND

At least 24 hours have passed since resolution of fever without that use of fever-reducing medications

AND

other symptoms have improved

ACTION OF TEAM(S)

All team activities are suspended for 14 days

COMMUNICATION REQUIRED

Club/team should communicate to the entire team(s) that have an individual on the team(s) has demonstrated symptoms will begin a quarantine. DO NOT give any names or personal details.

Club/team should communicate to any opposing teams that they played against within onset of symptoms that they had an individual with a positive test.

DO NOT give any names or personal details.

Complete USA SOFTBALL notification process, found on the USA SOFTBALL website.

Note: Opposing teams are not required to quarantine. Notification is done as a courtesy to be aware of the situation.

RETURN TO PLAY

All three actions (quarantine for 10 days after symptoms began, at least 24 hours without a fever without medicine, and other symptoms improved) have been met.



2022 SPRING SEASON

**Yuma Fast-Pitch & T-Ball
League Sports Inc**

Registration Form

U- _____ M/F

1st time registration: Y / N

Birth Certificate: Y / N

(For YFTL staff use ONLY)

*** Child **MUST** have been born between 2018-2007 to Participate

*** 1st time registration **REQUIRES** copy of birth certificate

Early Registration: DEC 20, 2021 – JAN 31, 2022 (Tiny-Tot & T-Ball = \$90, 8U-14U = \$90)

Late Registration: FEB 1 2022 – FEB 28 2022 (Tiny-Tot & T-Ball = \$100, 8U-14U = \$110)

**** Please make payments to City of Yuma, 1 City Plaza, Yuma AZ 85365 Phone: 928-373-5243 ****

*** NO REFUNDS AFTER 03/04/2022 ***

Last Name: _____ First Name: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Telephone: _____ Male / Female

E-mail Address **(REQUIREMENT TO COMPLETE REGISTRATION):** _____

Mother (Guardian) Name: _____ Contact number: _____

Father (Guardian) Name: _____ Contact number: _____

Other Emergency Contact Name: _____ Contact number: _____

Family Physician: _____ Contact number: _____

Medical Problem or Limitations of Player: _____

Please circle if interested

A) BOARD MEMBER B) VOLUNTEER C) TEAM SPONSOR D) COACH E) ASSIST./TEAM PARENT

BUDDY SYSTEM- You may **ONLY** buddy with **ONE** other player. Younger of two players can move up **ONLY** 1 age group, **CAN NOT** drop-down age group. If you choose to participate in the Buddy System, both applications **MUST BE STAPLED TOGETHER AND THE BUDDY NAME, DATE OF BIRTH AND PHONE # MUST BE LISTED BELOW. NON-STAPLED "BUDDY REQUESTS" WILL NOT BE HONORED.**

*******Buddied players cannot be picked by a coach unless the coach picks both players*******

BUDDY NAME: _____ Date of Birth: _____ CONTACT#: _____ Parent Initial acknowledging Buddy System Rules: _____

JERSEY: Please Circle

YOUTH SIZES: YXS YS (4-6) YM (8-10) YL (12-14) **ADULT SIZES:** AS AM AL AXL AXXL

and consent to an x-ray examination, anesthetic, medical, or surgical diagnosis rendered under general or special supervision of any member of the medical staff under the provision of the Medical Practice Act, or a dentist licensed under the provision of the Dental Practice Act and on the staff at any acute general hospital currently licensed by the State Department of Public Health. This authorization is given pursuant to the provisions of the civil code in my home state. Furthermore, I grant YFTL permission the use of my child's name and use of their likeness in a photograph, video, or other digital reproduction (herein referred to as "likeness") in any and all of its publications, including website entries, without payment or any other consideration for YFTL event(s); I understand and agree that these materials will become property of YFTL. I hereby irrevocably authorize YFTL to edit, alter, copy, exhibit, publish or distribute my child's likeness for purposes of publicizing its programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge YFTL from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization. I have received, read, and adhere to the YFTL Concussion Policy and Parent Code of Conduct. I have read this release before signing below and I fully understand the contents, meaning, and impact of this consent. In the event of a refund is requested, the following shall occur. 1) Requests must be made to the YFTL Board of Directors in written form and sent to YumaYFTL@gmail.com 2) Refund requests must be made before the first week of games are played. 3) If request for refund is made after uniforms have been ordered, the cost of the uniform will be deducted from the refund. 4) Refunds will be processed and made available after 4 weeks into the season when games are played. 5) Refunds will be given minus \$17.00 due to processing fee. The player package will include a shirt/jersey, picture packet, and participation award. Additionally, YFTL may also include pants, socks, and a hat/visor, but is not guaranteed.

Printed Name: _____ Signature: _____ Date: _____



In order to help protect the players of Arizona, YFTL has mandated that our players, parents/guardians, and coaches follow the **YFTL Concussion Policy**.

What can happen if my child/player keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents, and players is the key for an athlete's safety.

If you think your child/player has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours.

"A young athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time and may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider."

Licensed Health Care Providers acceptable to make the determination:

1. Medical Doctors (MD)
2. Doctor of Osteopathy (DO)
3. Advanced Registered Nurse Practitioner (ARNP)
4. Physicians Assistants (PA)
5. Licensed Certified Athletic Trainers (ATC)

You should also inform your child's coach if you think that your child/player may have a concussion. Remember, it is better to miss one game than miss the whole season. **When in doubt, the athlete sits out.**

For current and up-to-date information on concussion, you can go to:
<https://www.cdc.gov/headsup/youthsports/index.html>

This form remains possession of player parent/guardian for their record and review



A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child/player reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of the following:

Headaches	Amnesia
“Pressure in head”	Don’t feel right
Nausea or Vomiting	Fatigue or low energy
Neck Pain	Sadness
Balance problem or Dizziness	Nervousness or anxiety
Blurred, Double, or Fuzzy Vision	Irritability
Sensitivity to light or noise	More Emotional
Feeling sluggish or slowed down	Confusion
Feeling Foggy or groggy	Concentration or Memory problems
Drowsiness	(forgetting game plays)
Change in sleep patterns	Repeating the same question/comment

Signs observed by teammates, parents, and coaches can include :

Appears dazed
 Vacant Facial Expression
 Confused about assignment
 Forgets plays
 Is unsure of game, score, or opponent
 Moves clumsily or displays in-coordination
 Answers questions slowly
 Slurred speech
 Shows behavior or personality changes
 Can’t recall events prior to hit
 Can’t recall events after hit
 Seizures or convulsions
 Any change in typical behavior or personality
 Loses consciousness

This form remains possession of player parent/guardian for their record and review



PARENT CODE OF CONDUCT

***FOLLOW THE GOLDEN RULE** - Always treat others (coaches, parents, officials, and players) the same way that you would want your child to be treated. Set the example by showing respect, dignity, and total sportsmanship at all times.

***PARENTS** - Youth baseball/softball is for kids. If you find yourself becoming too emotionally involved in what's happening on the fields, take a step back, relax, and enjoy the game. Remember to give the young players the freedom to enjoy playing.

***BE RESPONSIBLE** - Please bring your child to practice and games on time. Make sure they are prepared with their uniform and cleats. Teach the benefits of eating properly before a game and how important it is to drink water/fluids during the games. Also, be on time to pick up your child after practice. The coach sets practice times and depends on you to be there so he/she can go home too.

***BE SEEN, NOT HEARD** - Nothing is better for a young player than having their parents present to watch them play. Nothing is worse for a player than hearing a parent booing, taunting, screaming, or making comments at or about, players, coaches, fan and/or officials. Offer applause and cheers of encouragement for both teams, following a good play or great effort; otherwise keep negative comments to yourself.

***IT'S SUPPOSED TO BE FUN** - Help make it that way! Keep smiling. Encouragement, enjoyment, and participation rather than the end results of whether your player's team wins or loses. Should be the focus; if it's not fun, something's wrong.

***MOTIVATE THROUGH CONFIDENCE** - Try and identify a position, aspect or thing your child did from every game or practice, and tell them about it to help build confidence. A young player's sense of achievement is the greatest motivator.

***DON'T QUESTION AN OFFICIALS CALL** - You may not agree with a call, but it's not your job (or the players or coaches) to officiate the game. Never should an official's call be argued by anyone. Accept the call and move on.

***TALK WITH THE COACH AFTER THE GAME** - If you have concerns regarding how the coach is running the team, please speak to them privately the next day. Let the heat of the moment pass. Never make a scene in front of the team as it's embarrassing for you, your child and the coach. Also, take the time to compliment the coach. Remember, they volunteer many hours to help give your child a positive experience. You may also contact the Recreation Supervisor to voice your concerns.

***PUT WINNING AND LOSING INTO PERSPECTIVE** - Games have winners and losers. Speak with your child, and let them know it's alright to lose; the important thing is that the experience was a positive one.

***AVOID THE POST GAME ANALYSIS** - Don't analyze your player's performance following every game. If you do, chances are they will avoid talking to you after games or worse yet not want you at the games at all and quit playing. Let your child come to you for advice and again, always be positive.

***PRACTICE** - Take the time to practice with your child; it will help improve their skills and will enhance the quality time you spend with your child.

This form remains possession of player parent/guardian for their record and review